

(Important: Type or print; read instructions before completing form.)

EPA U.S. Environmental Protection Agency**TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM**Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986,
also known as Title III of the Superfund Amendments and Reauthorization Act.

EPA FORM

R**PART I:**
**FACILITY
IDENTIFICATION
INFORMATION**

(Leave space for your optional use)

Public reporting "burden" for this collection of information is estimated to vary from 30 to 34 hours per response, with an average of 31 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Chief, Information Policy Branch (PM-223), U.S. EPA, 401 M St., S.W., Washington, D.C. 20460. Attn: TSCA Burden and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project 1700-0403, Washington, D.C. 20580.

- 1.1 Are you claiming the chemical identity on page 3 (trade secret)?
 Yes (Answer question 1.2). No (Do not answer 1.3). Do not answer 1.3.
- 1.2 If "Yes" in 1.1, in this form? Serialized Unserialized
- 1.3 Reporting Year **1990**

2. CERTIFICATION (Read and sign after completing all questions.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurately based on reasonable estimates using data available to the preparer of this report.

Name and official title of owner/operator or senior management officer:

DOUGLAS C. BROWN**SECRETARY**

Signature:

Douglas C. Brown

Date signed:

6/3/91**3. FACILITY IDENTIFICATION**

Facility or Establishment Name	
ALASKAN COPPER WORKS	
Street Address	
3200 6TH AVE. SO.	
City	County
Seattle	KING
State	Zip Code
WASHINGTON	98134
TPN Facility Identification Number	
981341SKNC 32000	

WHERE TO SEND COMPLETED FORMS:

1. **EPCRA REPORTING CENTER**
P.O. BOX 27779
WASHINGTON, DC 20026-3779
ATTN: TOXIC CHEMICAL RELEASE INVENTORY

2. APPROPRIATE STATE OFFICE (See Instructions In Appendix G)

3.2 This report contains information for (Check only one):		a. <input checked="" type="checkbox"/> An entire facility	b. <input type="checkbox"/> Part of a facility
3.3 Technical Contact		James C. Brown	
3.4 Public Contact		James C. Brown	
3.5 SIC Code (4 digit) 3498		Latitude Degrees Minutes Seconds 47° 33' 30"	
		Longitude Degrees Minutes Seconds 122° 18' 30"	
3.6 DSN & Broadcast Number(s) 00-925-5571		3.7 EPA Identification Number(s) (RCRA I.D. No.) WAD980738546	
3.8 NPDES Permit Number(s) NA		3.9 Receiving Streams or Water Bodies (enter one name per box) NA	
3.10		3.11 Underground Injection Well Code (UIC) Identification Number(s) NA	

4. PARENT COMPANY INFORMATION

Name of Parent Company ALASKAN COPPER COMPANIES	Parent Company's DSN & Broadcast Number 00-925-5571
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EPA Form 0350-1 (1-80) Revised - Do not use previous versions.

TNL

EPA

EPA FORM R
**PART II. OFF-SITE LOCATIONS TO WHICH TOXIC
 CHEMICALS ARE TRANSFERRED IN WASTES**

(This space for your optional use)

1. PUBLICLY OWNED TREATMENT WORKS (POTWs)**1.1 POTW name****METRO**

Street Address

821 SECOND AVE.

City

SEATTLE

County

KING

State

WASHINGTON

Zip

98104-1598**1.2 POTW name**

Street Address

City

County

State

Zip

2. OTHER OFF-SITE LOCATIONS (DO NOT REPORT LOCATIONS TO WHICH WASTES ARE SENT ONLY FOR RECYCLING OR REUSE)**2.1 Off-site location name****CHEM PRO**

EPA Identification Number (RCRA ID. No.)

WAD 991281767

Street Address

20245 76TH AVE. So.

City

KENT

County

KING

State

WASHINGTON

Zip

98032-1362**2.2 Off-site location name****NORTHWEST ENVIROSERVICE**

EPA Identification Number (RCRA ID. No.)

WAD05B367152

Street Address

1500 AIRPORTWAY So.

City

SEATTLE

County

KING

State

WASHINGTON

Zip

98134

Is location under control of reporting facility or parent company?

 Yes No

Is location under control of reporting facility or parent company?

 Yes No**2.3 Off-site location name****2.4 Off-site location name**

EPA Identification Number (RCRA ID. No.)

EPA Identification Number (RCRA ID. No.)

Street Address

Street Address

City

City

County

State

State

ZIP

Is location under control of reporting facility or parent company?

 Yes No

Is location under control of reporting facility or parent company?

 Yes No**2.5 Off-site location name****2.6 Off-site location name**

EPA Identification Number (RCRA ID. No.)

EPA Identification Number (RCRA ID. No.)

Street Address

Street Address

City

City

County

State

State

ZIP

Is location under control of reporting facility or parent company?

 Yes No

Is location under control of reporting facility or parent company?

 Yes No Check if additional pages of Part II are attached. How many? _____

(Important: Type or print; read instructions before completing form.)

PAGE 3 OF 5



EPA FORM R
PART III. CHEMICAL-SPECIFIC INFORMATION

(Type space for your signature here.)

1. CHEMICAL IDENTITY (Do not complete this section if you complete Section 2.)

1.1	[Reserved]
1.2	CAS Number (Enter only one number exactly, as it appears on the SIC list. Enter NA if reporting a chemical category.) 7440-02-0
1.3	Chemical or Chemical Category Name (Enter only one name exactly as it appears on the SIC list.) NICKEL
1.4	Generic Chemical Name (Complete only if Part I, Section 1.1 is marked "Yes." Generic name must be structurally descriptive.) NA

MIXTURE COMPONENT IDENTITY (Do not complete this section if you complete Section 1.)

2.	Generic Chemical Name (Provided by Supplier) (Limit the name to a maximum of 10 characters [e.g., numbers, letters, spaces, punctuation]). NA
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3. ACTIVITIES AND USES OF THE CHEMICAL AT THE FACILITY (Check all that apply.)

3.1	Manufacture the chemical: NA	a. [] Produce b. [] Import	c. [] For import d. [] For on-site use/processing e. [] As a byproduct	f. [] For sale/distribution g. [] As an impurity
3.2	Process the chemical:	a. [] As a reactant d. [] Repackaging only	b. [] As a formulation component	c. [] As an article component
3.3	Otherwise use the chemical: NA	a. [] As a chemical processing aid	b. [] As a manufacturing aid	c. [] Auxiliary or other use

4. MAXIMUM AMOUNT OF THE CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

05 (Enter code)

5. RELEASES OF THE CHEMICAL TO THE ENVIRONMENT ON-SITE

	A. Total Release (pounds/year)	B. Basis of Estimate		C. % From Stormwater
		A.1 Reporting Range 1-10 11-499 500-999	A.2 Enter Estimate (Enter code)	
You may report releases of less than 1,000 pounds by checking ranges under A.1. (Do not use both A.1 and A.3.)				
5.1 Fugitive or non-point air emissions	5.1.a [] [] []	NA	5.1.b []	
5.2 Stack or point air emissions	5.2.a [] [] []	NA	5.2.b []	
5.3 Discharges to receiving streams or water bodies (Enter letter code for stream from Part I Section 3.10 in the box provided.)	5.3.1 [] [] [] 5.3.2 [] 5.3.3 []	NA	5.3.1.b [] 5.3.2.b [] 5.3.3.b []	5.3.1.c [] 5.3.2.c [] 5.3.3.c []
5.4 Underground injection on-site	5.4.a [] [] []	NA	5.4.b []	
5.5 Releases to land on-site	5.5.1.a [] [] [] 5.5.2.a [] [] [] 5.5.3.a [] [] [] 5.5.4.a [] [] []	NA	5.5.1.b [] 5.5.2.b [] 5.5.3.b [] 5.5.4.b []	

[] (Check if additional information is provided on Part IV-Supplemental Information.)



ERA FORM R

PART III. CHEMICAL-SPECIFIC INFORMATION
(continued)

(This space for your optional use.)

NICKEL

6. TRANSFERS OF THE CHEMICAL IN WASTE TO OFF-SITE LOCATIONS

You may report transfers of less than 1,000 pounds by checking ranges under A.1. (Do not check both A.1 and A.2.)

	A. Total Transfers (pounds/year)		B. Basis of Estimate (enter code)	C. Type of Treatment/Disposal (enter code)
	A.1 Reporting Range 1-10 11-499 500-999	A.2 Enter Estimate		
6.1.1 Discharge to POTW (enter location number from Part II, Section 1.)	[] [] []	[X] [] []	6.1.1b [M]	
6.2.1 Other off-site location (enter location number from Part II, Section 2.)	[] []	[X] [] []	6.2.1b [M]	6.2.1a [M] []
6.2.2 Other off-site location (enter location number from Part II, Section 2.)	[] []	[] [] [X]	6.2.2b [M]	6.2.2a [M] []
6.2.3 Other off-site location (enter location number from Part II, Section 2.)	[] []	[] [] []	6.2.3b []	6.2.3a [M] []

[] Check if additional information is provided on Part IV-Supplemental Information.

7. WASTE TREATMENT METHODS AND EFFICIENCY

[] Not Applicable (NA) - Check if no on-site treatment is applied to any wastes stream containing the chemical or chemical category.

A. General Wastes Stream (enter code)	B. Treatment Method (enter code)	C. Range of Influent Concentration (enter code)	D. Sequential Treatment? (check if applicable)	E. Treatment Efficiency Estimate	F. Based on Operating Data? Yes No
7.1a [W]	7.1b [C01]	7.1c []	7.1d [NA]	7.1e 99.2%	7.1f [X] []
7.2a []	7.2b [] [] []	7.2c []	7.2d []	7.2e %	7.2f [] []
7.3a []	7.3b [] []	7.3c []	7.3d []	7.3e %	7.3f [] []
7.4a []	7.4b [] []	7.4c []	7.4d []	7.4e %	7.4f [] []
7.5a []	7.5b [] []	7.5c []	7.5d []	7.5e %	7.5f [] []
7.6a []	7.6b [] []	7.6c []	7.6d []	7.6e %	7.6f [] []
7.7a []	7.7b [] []	7.7c []	7.7d []	7.7e %	7.7f [] []
7.8a []	7.8b [] []	7.8c []	7.8d []	7.8e %	7.8f [] []
7.9a []	7.9b [] []	7.9c []	7.9d []	7.9e %	7.9f [] []
7.10a []	7.10b [] []	7.10c []	7.10d []	7.10e %	7.10f [] []

[] Check if additional information is provided on Part IV-Supplemental Information.)

8. POLLUTION PREVENTION: OPTIONAL INFORMATION ON WASTE MINIMIZATION

(Indicate actions taken to reduce the amount of the chemical being released from the facility. See the instructions for coded items and an explanation of what information to include.)

A. Type of Modification (enter code)	B. Quantity of the Chemical in Waste Prior to Treatment or Disposal	C. Index	D. Reason for Action (enter code)
M	Current reporting year (pounds/year)	Prior year (pounds/year)	Or percent change (Check (+) or (-))